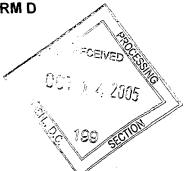
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION



OMB APPROVAL

OMB Number: 3235-0076

Expires: April 30, 2008

Estimated Average burden hours per form 16.00



Name of Offering:					0000007
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	Section 4(6)	☐ ULOE
Type of Filing:	New Filing	☐ Amendment			
	A. B	ASIC IDENTIFICA	TION DATA		
1. Enter the information requested about the iss	uer				
Name of Issuer (☐ check if this is an ame DIGITAL LIFESTYLES GROUP INC.	ndment and name ha	s changed, and indica	te change.)		
Address of Executive Offices 727 Brea Canyon Road #6, Walnut, CA 91789	(Number	and Street, City, Stat	e, Zip Code)	Telephone Number (Inch (909) 869-0595	uding Area Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number	and Street, City, Stat	e, Zip Code)	Telephone Number (Incl	uding Area Code)
Brief Description of Business					
Type of Business Organization					1.00 CEONED
区 corporation	limited partner	ship, already formed	 0	ther (please specify):	OCT 18 2005
☐ business trust	☐ limited partner	ship, to be formed			IROGGO
Actual or Estimated Date of Incorporation or Or	ganization:	Montl 0 5	Yea 94	r ▼ Actual	□ Estimated
Jurisdiction of Incorporation: (Enter two-letter CN for Canada	J.S. Postal Service A a; FN for other foreig			D	E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



	. 10 1 01	A. BASIC IDENTIF	ICATION DATA					
	• Each promoter of the issuer, if the issuer has been organized within the past five years;							
	 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 							
			eneral and managing partners	of partnership issuer	s; and			
	naging partner of parti		M D d O M					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director		General and/or Managing Partner		
Full Name (Last name first, if in TENG, ANDY	idividual)							
Business or Residence Address	(Number and Street,	City, State, Zip Code)						
727 Brea Canyon Road #6, Wal	nut, CA 91789	· · · · · · · · · · · · · · · · · · ·						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director		General and/or Managing Partner		
Full Name (Last name first, if it	ndividual)							
CHEN, LEO								
Business or Residence Address	(Number and Street,	City, State, Zip Code)						
727 Brea Canyon Road #6, Wal	nut, CA 91789							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director		General and/or Managing Partner		
Full Name (Last name first, if it	ıdividual)							
FURROW, SAMUEL J., (JAY)				· · · · · · · · · · · · · · · · · · ·				
Business or Residence Address		City, State, Zip Code)						
727 Brea Canyon Road #6, Wal								
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner		
Full Name (Last name first, if in	ndividual)							
LAN PLUS INC. EMPLOYEE	STOCK OWNERSHI	P PLAN						
Business or Residence Address	(Number and Street,	City, State, Zip Code)						
c/o Digital Lifestyles Group Inc	. 727 Brea Canyon Ro	ad #6, Walnut, CA 91789						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner		
Full Name (Last name first, if in	ndividual)							
Business or Residence Address	(Number and Street,	City, State, Zip Code)						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner		
Full Name (Last name first, if in	ndividual)							
Business or Residence Address	(Number and Street,	City, State, Zip Code)			·····			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner		
Full Name (Last name first, if it	ndividual)		 					
						· 		
Business or Residence Address	(Number and Street,	City, State, Zip Code)						
	(Use blan	nk sheet, or copy and use addition	nal copies of this sheet, as ne	ecessary.)				

					B. I	NFORMA	TION A	BOUT OF	FERING					
													Yes	No
1.	Has the issuer	r sold, or do	es the issue	r intend to	sell, to non	-accredited	investors in	n this offeri	ng?	• • • • • • • • • • • • • • • • • • • •	•••••	•••••		×
								umn 2, if fil	-					
2.	What is the m	inimum in	estment that	at will be ac	ccepted from	m any indiv	idual?					••••••		
													Yes	No
3.	Does the offer		•	-	-									
4.	solicitation of	f purchaser h the SEC	s in connec and/or with	tion with s a state or s	ales of sec tates, list th	urities in the name of	ne offering the broker	If a person or dealer. I	on to be lis	ted is an a	ssociated p	erson or ag	similar remundent of a brokenssociated persociated	r or dealer
Full	Name (Last na	me first, if	individual)											
NO	COMMISSION	NS TO BE I	PAID											
	iness or Reside			and Street,	City, State,	Zip Code)								
						•								
Nar	ne of Associate	d Broker or	Dealer				<u> </u>	<u> </u>						
	ne of historiae	u Dionei oi	Doulei											
Char	an in Which De	T (II. Caliale		4 C-13-3	. D l								
Sta	tes in Which Pe	rson Listed	Has Solicit	ea or intend	is to Solici	Purchasers	5							
	(Check "All S												🗷 All Si	ates
	[AL]	(AK)	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[D]	
	[IL] {MT}	[IN] [NE]	[IA] [NV]	(KS) (NH)	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full	Name (Last na	me first, if	individual)				- <u> </u>							
Bus	iness or Reside	nce Addres	s (Numbe	r and Street	t, City, Stat	e, Zip Code	:)							<u>.</u> .
Nar	ne of Associate	d Broker or	Dealer											
Ctot	tes in Which Per	man Listad	Uas Calinit	od or Inton	da to Colini	t Dusahasas								
Stat						ruichaseis	•							
	(Check "All S			,									🗖 All Si	ates
	[AL] [IL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
	[RI]	[SC]	[SD]	(TN)	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]	
Full	l Name (Last na	me first, if	individual)											
P	siness or Reside	nca Addron	c (Numba	r and Stran	t City Stat	e 7in Code								
Dus	siliess of Reside	nce Addres	s (Numbe	and Street	i, City, Stai	e, Zip Code	;)							
Nar	ne of Associate	d Broker or	Dealer											
Stat	tes in Which Pe	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser:	3			<u></u>	··· <u>-</u>			
	(Check "All S	States" or cl	neck individ	lual States)					•••••				🗖 Ali S	ates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [V (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants) PROMISSORY NOTES CONVERTIBLE INTO COMMON STOCK AND COMMON STOCK PURCHASE WARRANTS TO PURCHASE SHARES OF COMMON STOCK	\$1,000,000	\$250,000
	Partnership Interests	\$	\$
	Other (specify)	\$	\$
	Total	\$1,000,000	\$250,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$250,000
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$ N/A
	Regulation A	N/A	\$ N/A
	Rule 504	N/A	\$ N/A
	Total	N/A	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	x	\$ <u>2,000</u>
	Accounting Fees		\$
	Engineering Fees		\$ <u>·</u>
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) MISCELLANEOUS EXPENSES	x	\$ <u>1,000</u>
	Total	x	\$3,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregatotal expenses furnished in response to Part C - the issuer."	\$ <u>250.000</u>			
the purposes shown. If the amount for any pur	s proceeds to the issuer used or proposed to be used for each of pose is not known, furnish an estimate and check the box to the s listed must equal the adjusted gross proceeds to the issuer set is.			
		Payments to Officers, Directors, and Affiliates	Payments to Others	
Salaries and fees		□ \$	□ \$	
Purchases of real estate		□ \$		
Purchase, rental or leasing and installation of m	achinery and equipment	S	□ \$	
Construction or leasing of plant buildings and f	acilities	□ \$		
Acquisition of other businesses (including the way be used in exchange for the assets or secure	ralue of securities involved in this offering that ities of another issuer pursuant to a merger)	□ \$	□ \$	
Repayment of indebtedness		□ \$	E \$250,000	
Working capital		□ \$	□ \$	
Other (specify):		□ \$	□ \$	
Column Totals		□ \$	□ \$	
Total Payments Listed (column totals added)	250,000			
	D. FEDERAL SIGNATURE			
The issuer has duly caused this notice to be signed by a undertaking by the issuer to furnish to the U.S. Se ion-accredited investor pursuant to paragraph (b)(2)	the undersigned duly authorized person. If this notice is filed uncurities and Exchange Commission, upon written request of its state of Rule 502.	der Rule 505, the follo	wing signature constitutes nished by the issuer to any	
ssuer (Print or Type)	Signature	Date		
DIGITAL LIFESTYLES GROUP INC.	LEGICT	10/12/05		
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Samuel J. (JAY) Furrow, Jr.	Director			

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)